

EFFECTIVE

Immediately.

SUBJECT

Foster Care Transitional Medicaid (FCTMA)

Youth who age out of foster care are eligible for Foster Care Transitional Medicaid (FCTMA) once the foster care Medicaid case is closed. This applies to youth who are 18, 19 and 20 years of age. FCTMA is not available for active foster care cases.

Youth Eligibility Criteria

For FCTMA eligibility, the following criteria must be met. The youth:

- Is under 21 years of age.
- Is not currently incarcerated or in a locked facility.
- **At the time of the his/her 18th birthday**, was under the responsibility of the Michigan Department of Human Services (DHS) or tribal court and in one of the following out-of-home placements:
 - Licensed foster family home.
 - Relative provider home, licensed or unlicensed.
 - Group homes.
 - Emergency shelter.
 - Independent Living.
 - Child Care Institution. These facilities must be licensed or approved by the state and may **not** include:
 - Any public or private secure placement facility.
 - A public child care institution for more than 25 children.
 - Jail.
 - Detention facilities, forestry camps, training schools, or other facilities operated primarily for the detention of youth determined to be delinquent.

Additional information is available in Bridges Eligibility Manual (BEM) item 118, Foster Care Transitional Medicaid (FCTMA).

Absent Without Legal Permission (AWOLP)

Absence from a foster care placement upon reaching 18th birthday does not exclude youth from meeting FCTMA eligibility requirements. AWOLP youth with an open foster case remain under DHS responsibility.

FCTMA will not be activated for an AWOLP youth at case closure due to his/her unknown location. If the youth contacts the former foster care worker or the DHS foster care office in the youth's current county of residence, a manual referral must be made for FCTMA provided the eligibility requirements are met. The youth must have a valid mailing address.

Note: Returning AWOLP youth that remain on an active foster care case will continue to receive the Medicaid established prior to their absence. FCTMA is not available for active foster care cases.

Juvenile Justice Youth

Juvenile Justice youth that are eligible for Youth in Transition funded services may also be eligible for FCTMA. Juvenile Justice youth must meet all FCTMA eligibility criteria and have been in an eligible foster care placement setting under the supervision of DHS any time from the age of 14. An abuse/neglect history is not required for Juvenile Justice youth to receive FCTMA; see FOM 950, Youth in Transition, eligibility criteria.

Ineligible Youth

The following youth are not eligible for FCTMA:

- Juvenile Justice youth who have never been placed in a foster care setting supervised by DHS.
- Youth who were returned to the parental home prior to age 18.
- Youth who are in a locked facility or incarcerated at application.
- Out-of-Town Inquiry (OTI) youth; see Out-of-State Placements in this item.

Procedures for Enrollment

Prior to enrollment in FCTMA, the following must be in place:

- The Medicaid related to the foster care case must be closed.

- The youth must have a valid mailing address.

Automatic Referral

An active foster care case that is being closed in SWSS-FAJ with the close code of 06 (age), in combination with a Medicaid closure code of 097 (other) and living arrangement in table below, will generate an automatic referral from SWSS-FAJ to Bridges for FCTMA. Only use these codes when they accurately reflect the status of the foster care case.

The following SWSS-FAJ close and living arrangement codes support an automatic FCTMA referral to Bridges:

Automatic Referral FCTMA Criteria		
SWSS-FAJ Close Code	Medicaid Close Code	Living Arrangement Code
06	097	02 Licensed/Unlicensed Relatives
06	097	07 Independent Living

All other living arrangements will not generate an automatic referral to Bridges for FCTMA. The worker must make a manual referral, using the DHS-57 Foster Care Transitional Medicaid Referral form for FCTMA referrals for all other eligible youth (see below).

At case closure update the SWSS-FAJ placement record to reflect the youth's current living arrangement. All information pertaining to FCTMA will be sent to the last address listed in SWSS-FAJ. This address is transferred to Bridges during the automatic referral process. If the youth is moving to another address after case closure, notify the FCTMA Unit by email or by phone; see below.

Manual Referral

The DHS-57, Foster Care Transitional Medicaid Referral form, must be completed for eligible youth with any one of the following situations:

- The SWSS-FAJ case is being closed and the close code is not 06 (age).

- The SWSS-FAJ case is being closed and the living arrangement is the parental home (youth returned to home after reaching age 18).

Do not make a manual referral for FCTMA, if any one of the following applies:

- Youth is absent without legal permission at case closure, and youth's location is unknown. (If the youth later contacts the former foster care worker or DHS foster care office in youth's county of residence, a referral can be made at that time.)
- Youth chooses to remain in foster care after his/her 18th birthday and remains eligible for the current Medicaid plan (FCDW-MA).
- Youth is living in an out-of-state placement.
- Youth is incarcerated. (Youth can apply for FCTMA upon release.)
- A FCTMA referral through the automatic referral process was made.

The DHS-57 must be submitted when the Medicaid case is closing. Foster Care Transitional Medicaid is inaccessible while the Medicaid related to an active foster care case is open. Submission of the DHS-57 informs the FCTMA Unit to open FCTMA. Attempts to process the referral prior to the closure of the foster care Medicaid case will result in a denial of FCTMA and the referral process will need to be repeated.

Submit the DHS-57 to the FCTMA Unit:

- Electronically to *FCTMA@michigan.gov*.
- By fax to (517) 432-6079.

For any questions, contact the FCTMA Unit at (877) 268-3754.

PAFC Worker Process

To preclude duplication of referrals and to ensure that FCTMA eligibility is accurately determined prior to submission to the FCTMA Unit, the DHS-57 must be completed by the DHS foster care worker or monitor only. PAFC workers must forward the FCTMA referral to the DHC PAFC monitor to verify eligibility and to submit eligible FCTMA referrals to the FCTMA unit.

Notification Process

After a referral has been submitted for FCTMA, the FCTMA Unit:

- Certifies the youth's eligibility in Bridges.
- Sends a Notice of Case Action letter to the youth. If the youth is eligible, the letter will indicate that the youth has been enrolled in FCTMA.

Required Information for Youth

Prior to closing the foster care Medicaid (FCDW-MA) case, the foster care worker will provide the youth with the following information:

- Youth receiving FCTMA will continue to be Medicaid eligible through the month of their 21st birthday.
- A copy of the Michigan Department of Community Health (MDCH) publication, Guide to Michigan Medicaid Health Plans (updated annually). The foster care worker must review the guide with the youth. This publication is available online from the Michigan Department of Community Health website at: www.michigan.gov/mdch. Click on MDCH Brochures Available for Download from the Quick Links on the right side. Select Medicaid and Health Care Brochures.
- MHP enrollment information as outlined below.

FCTMA and Medicaid Health Plans

Upon enrollment into FCTMA, the Medicaid coverage is as follows:

- If the youth was enrolled in a Medicaid Health Plan (MHP) at the point of FCTMA referral and remains residing in the same county, the youth will remain enrolled with the current MHP.
- If the youth was receiving fee-for-service Medicaid or has moved outside of his/her MHP service area at the point of referral, Michigan Enrolls will mail an MHP enrollment packet to the youth at the address indicated on the referral.

Frequently Asked Questions and additional information regarding FCTMA is located on the Foster Youth in Transition (FYIT) website, www.michigan.gov/fyit, under Health and Wellness - Insurance - Foster Care Transitional Medicaid.

Documentation

The foster care worker must:

- Place a copy of the DHS-57, Foster Care Transitional Medicaid Referral form, in the Medical/Psychological section of the case file, if applicable.

Document discussion of FCTMA with the youth on the DHS-902, 90-Day Discharge Plan Report. Also indicate if a referral has been made for FCTMA.

**MANUAL
MAINTENANCE
INSTRUCTIONS**